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PTO/SB/21 (08-03)

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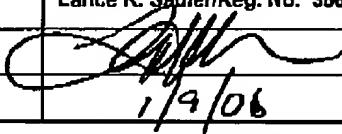
31

Application Number	09/732,086
Filing Date	12/6/2000
First Named Inventor	Eric H. Rudolph
Group Art Unit	2157
Examiner Name	HUSSEIN A. EL CHANTI
Attorney Docket Number	MS1-641US

ENCLOSURES (check all that apply)

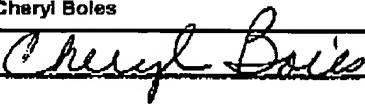
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> <input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> <input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Documents	<input type="checkbox"/> CD, Number of CD(s)	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
	Remarks	
<p>THIS IS A RESUBMISSION OF THE RESPONSE AND INFORMATION DISCLOSURE STATEMENT SENT TO THE PATENT OFFICE ON MAY 11, 2005 BY EXPRESS MAIL. A COPY OF THE EXPRESS MAIL RECEIPT, RETURN RECEIPT POSTCARD, TRANSMITTAL DOCUMENTS, RESPONSE AND IDS ARE INCLUDED FOR ENTRY INTO THE FILE FOR THIS APPLICATION.</p>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual Name	Lance R. Sadler/Reg. No. 38605
Signature	
Date	1/9/06

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Typed or printed name	Cheryl Boles
Signature	
Date	1-9-06

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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

**FEE TRANSMITTAL
For FY 2005** Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$ 180.00)**Complete if Known**

Application Number 09/732,086

Filing Date 12/6/2000

First Named Inventor Eric H. Rudolph

Examiner Name HUSSEIN a EL CHANTI

Art Unit 2157

Attorney Docket No. MS1 -641US

METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number: 12-0769 Deposit Account Name: Lee & Hayes, PLLC

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee

Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments

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FEES CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fee Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES**Fee Description**

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent

Fee (\$)	Small Entity Fee (\$)
50	25
200	100
360	180

Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent

Multiple dependent claims

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
- 20 or HP =	x 50 =					
HP = highest number of total claims paid for, if greater than 20						

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
- 3 or HP =	x 200 =		

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x		

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: Information Disclosure Statement

Fee Paid (\$)

180.00

SUBMITTED BY

Signature

Name (Print/Type)

Lance R. Sadler

Registration No. 38605
(Attorney/Agent)

Telephone (509) 324-9256

Date May 10, 2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).FEE TRANSMITTAL
For FY 2005 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 180.00)

Complete if Known

Application Number	09/732,086
Filing Date	12/6/2000
First Named Inventor	Eric H. Rudolph
Examiner Name	HUSSEIN a EL CHANTI
Art Unit	2157
Attorney Docket No.	MS1 -641US

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____

Deposit Account Deposit Account Number: 12-0769 Deposit Account Name: Lee & Hayes, PLLC

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

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FEE CALCULATION

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Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

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Fee Description

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent

Fee (\$)	Fee (\$)
50	25

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Multiple dependent claims

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• 100 =		/ 50 =	(round up to a whole number) x	=

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: Information Disclosure Statement 180.00

SUBMITTED BY

Signature	<i>Lance R. Sadler</i>	42,905	Registration No. (Attorney/Agent)	38605	Telephone (509) 324-9256
Name (Print/Type)	Lance R. Sadler				Date <i>May 10, 2005</i>

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

2 Application Serial No. 09/732,086
3 Filing Date December 6, 2000
3 Confirmation No. 3092
4 Inventor..... Eric H. Rudolph
4 Group Art Unit 2157
5 Examiner EL CHANTI, HUSSEIN A
5 Attorney's Docket No. MS1-641US
Title: Methods and Systems for Processing Multimedia Editing Projects

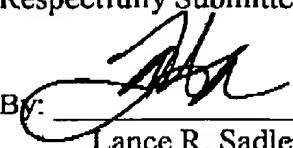
RESUBMISSION OF RESPONSE FILED 5/11/2005

8 To: Commissioner for Patents
9 PO Box 1450
9 Alexandria, VA 22313-1450
10 From: Lance R. Sadler (Tel. 509-324-9256; Fax 509-323-8979)
11 Customer No. 22801

12
13 The Patent Office records do not indicate that the accompanying Response
14 to Office Action Dated February 11, 2005 and Information Disclosure Statement,
15 which were sent by Express Mail on May 11, 2005, were received and entered in
16 PAIR. This resubmission is accompanied by a copy of the Express Mail receipt
17 which indicates that the Response and IDS was mailed on May 11, 2005. A copy
18 of the postcard receipt date stamped by the Patent Office May 11, 2005, also
19 indicates receipt by the Patent Office.

20 Please enter this Response and Information Disclosure Statement into the
21 file for this application.

22 Respectfully Submitted,

23 Date: 1/9/06
24 By: 
25 Lance R. Sadler
Reg. No. 38605

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EV64987-841

MSI-641US

Microsoft Corporation

5-11-2005

The stamp of the U.S. Patent and Trademark Office acknowledges receipt of the documents enumerated below, relating to the following application for letters patent:

Serial No.: 09/732,086

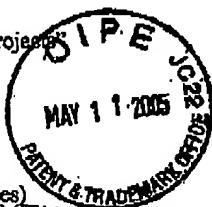
Filing Date: 12/6/2000

Title: "Methods and Systems for Processing Multimedias Editing Projects"

Inventorship: Eric H. Rudolph

Confirmation No: 3092

1. Transmittal Form
2. Fee Transmittal
3. Response to Office Action Dated 2/11/2005 (23 pages)
4. Information Disclosure Statement; Form PTO-1449 Reference Number (2)
5. Return Post Card



MAY 16 2005

LEE & HAYES, PLLC

LEE & HAYES, PLLC
1000 19th Street, N.W.
Washington, D.C. 20036

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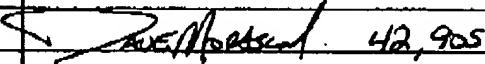
Total Number of Pages in This Submission

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First Named Inventor	Eric H. Rudolph
Group Art Unit	2157
Examiner Name	HUSSEIN a EL CHANTI
Attorney Docket Number	MS1-641US

ENCLOSURES (check all that apply)

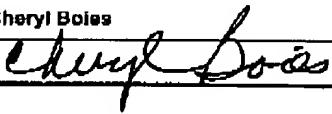
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to Group
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<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	<i>Form PTO-1449; reference copies (2); return receipt postcard</i>
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Documents	<input type="checkbox"/> CD, Number of CD(s)	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	<input type="checkbox"/> Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual Name	Lance R. Sadler/Reg. No. 38605
Signature	 42,905
Date	May 10, 2005

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Typed or printed name	Cheryl Boies		
Signature		Date	5-11-2005

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